

Washoe County Sheriff's Office - Forensic Science Division
PE Form Technical Review

Analyst Review Checklist

Necessary positive controls completed
and documented: n/a _____

Water control collected: n/a _____

Examinations requested by the
submitting agency completed: n/a _____

Samples referred to DNA: n/a _____

Agency item numbers added in the
description in the report: n/a _____

Received from date correct: n/a _____

Report header correct: n/a _____

Statistics added in LIMS n/a _____

Report contains type of testing
completed, i.e., Kastle-Meyer test,
acid phosphatase test, etc. n/a _____

Analyst: _____
Review Date

Technical Review Checklist

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Agree with interpretation: _____
Initials Date

Evidence Review

Chain of custody checked: Admin Reviewer: _____
Initials

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1616	9	Supervising Criminalist - Biology	3/16/2016 8:39:59 AM

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